

You are hereby authorized to manufacture and ship the following described product in accordance with the purchase order and specifications indicated.

DEPARTMENT				REQ. NO				DATE				PURCHASE ORDER NO.				PRINT ORDER NO.															
CONTRACTOR								JACKET NO.				ESTIMATED COST				SHIP/DEL DATE															
TITLE								OBJECT CLASS				STATE CODE				CONTR'S CODE				PROGRAM NO.											
PROOFS				SETS		DATE DUE		DAYS GOV'T		RETURN DATE		APPROPRIATION CHARGEABLE				BILLING ADDRESS CODE (BAC)				QUANTITY											
Gallery												COMPOSITION Phototype Cold Type Hot Metal				QUALITY LEVEL				TRIM SIZE											
Page																															
Blues																															
MATERIAL FURNISHED TO CONTRACTOR																															
Manuscript				Halftones				Line Illus.				Camera Copy				Negatives				Binders				Other							
TEXT STOCK								COVER STOCK								NO. OF TEXT PAGES (Including Blanks)				FOLD-IN STOCK											
FOUR COLOR PROCESS PRNTG.								COLOR OF INK								COVER PRINTS				FOLD-INS/FORMS				STRIP-INS				NEGATIVES			
Cover 1 2 3 4 Text								Cover Text								1 2 3 4				Face Only Face & Back								(No. Required)			
BINDING				1 ULC				Sew				Band units of				Drill _____ round holes _____ " in diameter on _____ side _____ inches c. to c. Center of holes _____ inches from _____ edge of sheet Pads of _____ sheets/sets each. Pad on the _____ " side. Chipboard required. Pack _____ per shipping container <input type="checkbox"/> Pallets required.															
				Saddle				Trim 4 Sides				Shrink Film Wrap units of																			
				Side				Perf. on Fold				Other																			
				Perfect				Adhesive Strip																							
DISTRIBUTION																RETURN NEGS TO GPO FOR STORAGE															
																NO <input type="checkbox"/> YES <input type="checkbox"/>															

Departmental Authority (Signature and Title)	Purchase Obligation	DATE SENT TO CONTRACTOR
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CONTRACTOR TO COMPLETE BOTTOM PORTION AND MAIL ENTIRE FORM TO: COMPTROLLER-FME, FINANCIAL MANAGEMENT SERVICE, U.S. GOVERNMENT PRINTING OFFICE, WASHINGTON, D.C. 20401

Contractor Invoice No. \_\_\_\_\_ Date Prepared \_\_\_\_\_

Date of Delivery/Shipment Discount Terms

ARTICLES OR SERVICES	QUANTITY	COST	UNIT PRICE PER	AMOUNT
IF ADDITIONAL SPACE IS REQUIRED, USE STD. FORM 1034, 1035, OR ATTACH YOUR INVOICE			<b>TOTAL</b>	

I CERTIFY THAT THE MATERIAL, GOODS, OR SERVICES HAVE BEEN DELIVERED/SHIPPED ON THE DATE INDICATED ABOVE AND THAT PAYMENT OR CREDIT HAS NOT BEEN RECEIVED.

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Gallery									
Page									
Blues									
MATERIAL FURNISHED TO CONTRACTOR				APPROPRIATION CHARGEABLE		BILLING ADDRESS CODE (BAC)		QUANTITY	
Manuscript		Halftones		Line Illus.		Camera Copy		Negatives	
								Binders	
								Other	
TEXT STOCK				COVER STOCK		NO. OF TEXT PAGES (Including Blanks)		FOLD-IN STOCK	
FOUR COLOR PROCESS PRNTG.				COLOR OF INK					
Cover		1 2 3 4 Text		Cover		1 2 3 4 Text		FOLD-INS/FORMS	
								Face Only	
								Face & Back	
								STRIP-INS	
								NEGATIVES (No. Required)	
1 ULC		Sew		Band units of		Drill _____ round holes _____ " in diameter on _____ side _____ inches c. to c.			
Saddle		Trim 4 Sides		Shrink Film Wrap units of		Center of holes _____ inches from _____ edge of sheet			
Side		Perf. on Fold		Other		Pads of _____ sheets/sets each. Pad on the _____ " side. Chipboard required.			
Perfect		Adhesive Strip				Pack _____ per shipping container <input type="checkbox"/> Pallets required.			

DISTRIBUTION RETURN NEGS TO GPO FOR STORAGE NO ☐ YES ☐

RETURN ORIG. AND/OR NEGS. TO:

Departmental Authority (Signature and Title)		Purchase Obligation		DATE SENT TO CONTRACTOR	
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The penalty for making false statements to the Government is prescribed in 18 USC 1001. (Signature of person authorized to sign)

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